

# UNITED STATES U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

11170	
OMB APPROVAL	
	5-0076
	1, 2005
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DATE REUL.	

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)					
	Dittybase Technologies Private	vate Placement			
Filing Under (Check box(es) that apply):	Rule 504	06 Section 4(6) ULOE			
Type of Filing: New Filing  Amend	lment				
	A. BASIC IDENTIFICAT	TON DATA			
1. Enter the information requested about the	issuer				
Name of Issuer ( check if this is an an	nendment and name has changed, and inc	dicate change.)			
Dittybase Technologies Inc.					
Address of Executive Offices (Nu	mber and Street, City, State, Zip Code)	Telephone Number (Including Area Code)			
Suite 102 31 Bastion Square, Victoria	a, BC V8W 1J1	250-381-8780			
Address of Principal Business Operations (Nur	mber and Street, City, State, Zip Code)	Telephone Number (Including Area Code)			
(if different from Executive Offices) Same		Same			
Brief Description of Business		L Alim 1 m agas			
		£ AUG 1 5 2006			
Music Software		1 (-4)/ 7)/ / (2) (2)			
Type of Business Organization	[ ] limited mosts are him almost to formed	I HOMSON  Other (please specify): FINANCIAL			
☑ corporation	limited partnership, already formed	other (please specify): FINANCIAL			
☐ business trust	limited partnership, to be formed				
Actual or Estimated Date of Incorporation or C					
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abl				
	CN for Canada; FN for other foreign jur	risdiction) CN			

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only reported the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA			
2. Enter the information rec	juested for the follow	owing:				
<ul> <li>Each promoter of the</li> </ul>	ne issuer, if the iss	uer has been organized with	nin the past five years;			
<ul> <li>Fach beneficial own of the issuer,</li> </ul>	ner having the pow	ver to vote or dispose, or dis	rect the vote or disposition	of, 10% or more o	f a class of equity securities	
<ul> <li>Each executive office</li> </ul>	er and director of	corporate issuers and of co	rporate general and manag	ging partners of pa	rtnership issuers; and	
<ul> <li>Each general and m</li> </ul>	anaging partner o	f partnership issuers.		<u> </u>		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partners						
Full Name (Last name first, if	individual)					
Tim Daniels						
Business or Residence Address	s (Number and St	reet, City, State, Zip Code)				
Suite 102 31 Bastion Str	reet, Victoria,	BC V8W 1J1				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Lance Landiak						
Business or Residence Addres	s (Number and St	reet, City, State, Zip Code)				
Suite 102 31 Bastion St	reet, Victoria,	BC V8W 1J1				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Blake Fallis						
Business or Residence Addres	ss (Number and St	reet, City, State, Zip Code)				
Suite 102 31 Bastion St	reet, Victoria,	BC V8W 1J1				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Mike Knuten						
Business or Residence Addres	ss (Number and St	reet, City, State, Zip Code)	 			
Suite 102 31 Bastion St	reet, Victoria,	BC V8W 1J1				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Duane Miller						
Business or Residence Addres	ss (Number and St	treet, City, State, Zip Code)	l			
Suite 102 31 Bastion St	reet, Victoria,	BC V8W 1J1				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Business or Residence Addres	ss (Number and S	treet, City, State, Zip Code)				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Business or Residence Addres	ss (Number and S	treet, City, State, Zip Code)	\\			
	(Use blan	k sheet, or copy and use a	additional copies of this	sheet, as necessa	rv.)	

^	B. INFORMATION ABOUT OFFERING	
1	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes No
1.		
_	Answer also in Appendix, Column 2, if filing under ULOE.	N NC '
2.	What is the minimum investment that will be accepted from any individual?	No Minimum
3.	Does the offering permit joint ownership of a single unit?	Yes <u>X</u> No
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	
Ful	Name (Last name first, if individual)	
No	t Applicable	
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)	
Nar	ne of Associated Broker or Dealer	
Stat	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
	(Check "All States" or check individual States)	All States
ſ	AL] [AK] [AZ] [AR] [CA]X [CO] [CT] [DE] [DC] [FL] [GA]	[HI] [D]
E	IL ] [IN ] [IA ] [KS ] [KY ] [LA ] [ME ] [MD] [MA] [MI ] [MN]	[ MS ] [ MO ]
-	MT] [NE] [NV] [NH] [NJ]X [NM] [NY]X [NC] [ND] [OH] [OK] RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]	[OR] [PA] [WYIX [PR]
	l Name (Last name first, if individual)	Two programmes
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)	
Nar	ne of Associated Broker or Dealer	
Stat	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
	(Check "All States" or check individual States)	All States
[	AL ] [AK ] [AZ ] [AR ] [CA ]X [CO ] [CT ] [DE ] [DC ] [FL ] [GA ]	[HI] [ID]
_	IL ] [IN ] [IA ] [KS ] [KY ] [LA ] [ME ] [MD] [MA] [MI ] [MN]	[ MS ] [ MO ]
	MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK]	[OR] [PA]
	RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]  Name (Last name first, if individual)	[WY]X [PR]
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)	
Naı	me of Associated Broker or Dealer	
Sta	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
	(Check "All States" or check individual States)	All States
[	AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	[HI] [D]
[	IL ] [IN ] [IA ] [KS ] [KY ] [LA ] [ME] [MD] [MA] [MI] [MN]	[ MS ] [ MO ]
_	MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK]	[OR] [PA]
ſ	RI SC SD TN TX TUT VT VA WA WY WI	(WYI (PRI

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING I RICE, NUMBER OF INVESTORS, EXTENSES AND USE	OF I ROCEEDS	
•	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	alleady Chollanges.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	CDN\$ 23,764	CDN\$ 23,764
	Equity	<del></del>	<del></del>
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$ CDN\$ 23,764	CDN\$ 23,764
	Answer also in Appendix, Column 3, if filing under ULOE.		
<b>!.</b>	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	5	CDN\$23,764
	Non-accredited Investors	<del></del>	\$
	Total (for filings under Rule 504 only)	0	\$ 0
	Answer also in Appendix, Column 4, if filing under ULOE.		
<b>3</b> .	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of the securities in this offering. Classify securities by type listed in Part C - Question 1.	Toront	Dallandara
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	<del> </del>	\$
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the		Ψ
•	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		.s
	Printing and Engraving Costs		\$
	Legal Fees	_	\$_CDN\$1,700
	Accounting Fees		\$
	Engineering Fees	<u></u>	\$
	Sales Commissions (specify finders' fees separately) Andrews: 142,150 shares and Sagan 64,875 shares eshares	ach at \$0.75 per	\$
	Other Expenses (identify) Filing Fees.	<del></del>	CDN \$300
	Total		CDN\$2.000

	C. OFFERING PR	ICE, NUMBER OF INVESTORS, EXPENSE	ES AND	USE OF PROCEEDS	3	
<del></del> -	Question 1 and total expenses furnished in r	gregate offering price given in response to response to Part C - Question 4.a. This differen	nce is the	•		CDN\$2,1764
5.	for each of the purposes shown. If the amount	gross proceeds to the issuer used or proposed to int for any purpose is not known, furnish an esting the total of the payments listed must equal the in in response to Part C - Question 4.b above.	mate and	l		
		•		Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees			\$ <u> </u>		<b>\$</b> 0
	Purchase of real estate			\$ <u> </u>		\$0
	Purchase, rental or leasing and installation of	f machinery and equipment		\$ <u>0</u>		\$ <u> </u>
	Construction or leasing of plant buildings and	d facilities		\$0		\$ <u> </u>
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	e value of securities involved in this e assets or securities of another issuer		\$ 0		· \$ 0
				\$ 0		\$ 0
	• •			\$ <u> </u>	×	CDN\$21,764
				\$0		\$ <u>0</u>
				\$ <u> </u>		\$ <u> </u>
	Column Totals			\$ <u> </u>	Ø	CDN\$21,764
	Total Payments Listed (column totals added)	)		<b>1</b> <u>C</u>	DN\$21,	<u>764</u>
		D. FEDERAL SIGNATURE				
und		the undersigned duly authorized person. If this notice ties and Exchange Commission, upon written request ale 502.				
	ner (Print or Type) ttybase Technologies Inc.	Signature		Date July 17, 2006		
Nar	me of Signer (Print or Type)	Title of Signer (Print or Type)	>	<u>L</u>	<del></del>	
	m Daniels	President				
		ATTENTION				
	Intentional misstatements or	omissions of fact constitute federal cri	iminal	violations. (See 18	U.S.C	. 1001.)

		E. STATE SIGNATURE	
1.	Is any party described in 17 CFR 230.262 of such rule?	provisions Yes No	
		See Appendix, Column 5, for state resp	oonse.
2.	The undersigned issuer hereby undertakes 239.500) at such times as required by stat	•	in which this notice is filed, a notice on Form D (17 CFR
3.	The undersigned issuer hereby undertakes	to furnish to the state administrators, upon writt	en request, information furnished by the issuer to offerees.
4.		his notice is filed and understands that the issue	be satisfied to be entitled to the Uniform Limited Offering r claiming the availability of this exemption has the burden of
	e issuer has read this notification and knows horized person.	the contents to be true and has duly caused this	notice to be signed on its behalf by the undersigned duly
	uer (Print or Type) ttybase Technologies Inc.	Signature	Date July 17, 2006
	me of Signer (Print or Type)	Title of Signer (Print or Type)	
Ti	m Daniels	President	*

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1		2	3		4			Diagnal	
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK						· · · · · · · · · · · · · · · · · · ·			
AZ									
AR									
CA		Х	common stock	5	CDN\$23,764	0	0		Х
CO									
СТ									
DE									
DC									
FL					·				
GA									
НІ									
ID								-	
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО						<del></del>			

## APPENDIX

1	2 3				5 Disqualification					
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
MT										
NE										
NV										
NH										
NJ										
NM										
NY										
NC					:					
ND										
ОН										
OK										
OR	•									
PA										
RI										
SC										
SD										
TN				·		_				
TX										
UT										
VT										
VA										
WA										
wv										
WI										
WY										
PR										